

Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935
Madison, WI 53708-8935

FAX #: (608) 267-3816
Phone #: (608) 266-5511
<http://www.drl.state.wi.us>

1400 E. Washington Avenue
Madison, WI 53703

E-Mail: web@drl.state.wi.us
Website:

DIVISION OF PROFESSIONAL CREDENTIALING PROCESSING

AUCTIONEER EXAMINATION APPLICATION INSTRUCTION PACKET FOR THE CONTINUING EDUCATION TEST-OUT

Chapter RL 128, Wis. Admin. Code, states that every registered auctioneer applying to renew a registration for the January 1, 2002-December 31, 2004 biennium shall complete at least 12 hours in an educational program prior to January 1, 2005 or pass an education examination administered by the Department prior to January 1, 2005.

FILING AN APPLICATION

Applicants who wish to complete the continuing education test-out examination in lieu of taking the educational program shall submit the following information.

- Application for Examination (Form #2326).
- Examination fee of \$57 (check or money order made payable to the Department of Regulation and Licensing).

Retake applicants must complete and return the Application for Examination (Form #2326) and the retake examination fee of \$57. An applicant may retake the examination once. If an applicant fails the examination a second time, the applicant shall attend an approved educational program or courses.

Completed applications must be mailed to the address listed above.

Applications hand delivered or mailed by special courier must be addressed to the department's street address: 1400 East Washington Avenue, Room 173, Madison, WI 53703.

SPECIAL ACCOMMODATIONS

Individuals may request special accommodations for examinations by completing a Disability Accommodation Request Form available from the Office of Examinations at (608) 266-0405.

EXAMINATION DATE AND FILING DEADLINES

The department will be administering examinations on a monthly basis in Madison. The last opportunity to complete the examination before the renewal deadline of December 31, 2004 is December 9, 2004. There is a 30 day deadline to schedule for the examination.

EXAMINATION CONTENT

The content of the examination is based on a comprehensive task analysis survey completed by the Department of Regulation and Licensing in 1995. Auctioneers in Wisconsin were surveyed

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in order to identify tasks and knowledge, skills and abilities that were important to the activities of an auctioneer, both in terms of the amount of time spent on these tasks and their importance in terms of the health, safety or welfare of clients and the general public.

The content and process of the examination, and candidate performance, are regularly evaluated by the Department to assure that the examination fairly and effectively measures the skills and knowledge necessary to practice as an auctioneer.

The passing score for the examination was set by the Department in consultation with experts in the field. It reflects the minimum knowledge required by auctioneers to perform their duties to the public in a competent and responsible manner. The recommended passing score will be reported as a grade of 70.

of questions: 60 Items

Type of questions: Multiple Choice

Time limit: 1 hour 30 minutes

TEST SPECIFICATION

Presented below is the list of topics to be covered on the examination. The reference source for these topics is the "Wisconsin Statutes and Rules Relating to the Practice of Auctioneers and Auction Companies". To obtain a copy of the "Wisconsin Statutes & Rules" submit a check or money order to the Department of Regulation & Licensing for \$5.28 and indicate that you are requesting a copy of the Auctioneer code book. A copy of the Wisconsin Statutes and Rules Relating to the Practice of Auctioneers and Auction Companies is also available on the department's web site at www.drl.state.wi.us or at most public libraries.

- Auction Contracts
- Trust Accounts
- Conduct
- Registration Requirements
- Advertising
- Real Estate Auctions
- Federal and State Laws Related to Auctions

SAMPLE QUESTIONS

The following questions are offered as examples of the types of questions you will be asked during the course of the Wisconsin Auctioneer Continuing Education Test-Out Exam. The examples provided do not represent the full range of content or difficulty levels found in the actual examinations. They are intended to familiarize you with the types of questions you can expect to find in the examination. (An answer key is provided following the questions.)

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All questions in the examination will be multiple-choice with between three and five possible answers. The following are examples of questions similar to those on the examination.

1. Which of the following auctions is exempt from the registration requirements in the Wisconsin Statutes?
 - A. An auction of real estate
 - B. An auction of clothing
 - C. An auction conducted under court order
 - D. An auction of antiques
2. An individual who is registered as an auction company but not as an auctioneer may legally do all of the following except:
 - A. manage an auction.
 - B. call bids at an auction.
 - C. clerk at an auction.
 - D. handle sales proceeds at an auction.
3. Which of the following is a type of registration granted by the Wisconsin Department of Regulation and Licensing?
 - A. Auction company
 - B. Auction clerk
 - C. Auction house
 - D. Auction house operator
4. Wisconsin Seller's Permits are issued by the Department of:
 - A. Revenue.
 - B. Agriculture, Trade and Consumer Protection.
 - C. Regulation and Licensing.
 - D. Financial Institutions.
5. Which of the following is true of an auctioneer's trust account?
 - A. It may have a maximum of \$300,000 in it.
 - B. It may only be in a bank.
 - C. It is only to be used for the deposit of money owed to the auctioneer.
 - D. It may contain company funds needed to cover service charges relating to the account.
6. An auctioneer may maintain trust account records in a computerized system provided that:
 - A. the computer has a hard disk drive.
 - B. the auctioneer enters the data himself or herself.
 - C. a back-up copy of the computer records is made each day data is entered.
 - D. the auctioneer sends a back-up disk to the Department each month.

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7. A registered Wisconsin auctioneer may not:
- A. manage an auction.
 - B. clerk at an auction.
 - C. call bids at an auction of real estate.
 - D. escalate bids by the use of shills.
8. Which of the following are bovine animals?
- A. Horses
 - B. Goats
 - C. Milk Cows
 - D. Donkeys
9. An auctioneer has a contract with a seller that states that the seller pays all costs and the auctioneer receives an 8% fee from the gross revenue. The gross revenue is \$21,644.00 and the total costs are \$958.62. What does the auctioneer receive from the seller for services?
- A. \$1,654.83
 - B. \$1,731.52
 - C. \$1,870.04
 - D. \$2,164.40
10. For an estate auction the auctioneer is to receive a 9% fee on all revenue except the sale of the real property. The fee for the sale of the real property is to be 6%. The auctioneer is to pay all expenses out of the commission. The auction's total revenue is \$55,703.00 including a high bid of \$40,000.00 for the real estate. What is the commission the auctioneer receives?
- A. \$3,542.18
 - B. \$3,813.27
 - C. \$4,542.18
 - D. \$5,013.27

Answer Key			
1.	c	6.	c
2.	b	7.	d
3.	a	8.	c
4.	a	9.	b
5.	d	10.	b

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ADMISSION TICKETS

Approximately 10 days prior to the examination date an admission ticket will be mailed to each applicant approved for admission to the examination. The admission ticket will include the time, date, and location of the examination. Check the admission ticket carefully to be sure that you are scheduled for the correct examination and that your name and address are accurate.

You must take your admission card and an official, signed identification to the examination. An acceptable I.D. is a driver's license, State of Wisconsin identification card, passport, or immigration card.

REFUNDS/POSTPONEMENTS

The refund and postponement policy for examination applicants is covered in sec. RL 4.03, Wis. Admin. Code, which states:

- (1) A refund of all but \$10.00 of the fee shall be granted if:
 - (a) An applicant is found to be unqualified for an examination administered by the department or board;
 - (b) An applicant is found to be unqualified for a credential for which no examination is required;
 - (c) An applicant withdraws an application by written notice to the department or board at least 10 days in advance of any scheduled examination; or
 - (d) An applicant who fails to take an examination administered by the department or board either provides written notice at least 10 days in advance that the applicant is unable to take the examination, or if written notice was not provided, submits a written explanation satisfactory to the department or board that the applicant's failure to take the examination resulted from extreme personal hardship.
- (2) An applicant eligible for a refund may forfeit the refund and choose instead to take an examination administered within 18 months of the originally scheduled examination at no added charge.
- (3) An applicant who misses an examination as a result of being called to active military duty shall receive a full refund, except if an examination service vendor does not refund the applicant's costs to the department or board. These costs shall not be included in the department's or board's refund to the applicant. The applicant requesting the refund must supply a copy of the call up orders or a letter from the commanding officer attesting to the call up.
- (4) Applicants who pay fees to test providers other than the department are subject to the refund policy established by the test provider.

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EXAMINATION RESULTS

Applicants will be notified of the results by mail no later than four weeks after the examination date.

EXAMINATION REVIEW

Examination answer sheets are retained for one year. Applicants who failed the examination may attend a review session to review the examination. Materials available at the review sessions are the questions the applicant answered, a copy of the answer sheet submitted for grading and the correct response to each question. Applicants are permitted only one review of each failed examination.

Review sessions are held on specific dates. The cost for a review is \$28. Additional information on the review session dates will be provided with notification of receipt of a failing score.

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

WISCONSIN AUCTIONEER CONTINUING EDUCATION REQUIREMENTS

CE Requirements

Licensees must complete 12 hours of continuing education in each two-year renewal cycle (biennium). All CE must be completed by December 31 of the biennium. Education must be obtained from approved schools, must be the specific courses that are approved for that biennium, and must include an exam that is passed. Other states' continuing education courses do not satisfy Wisconsin's requirements.

Everyone must take the following 3 courses during the 2003-2004 biennium:

- Course A Auctioneer Ethical and Professional Conduct/Wisconsin Laws
- Course B Maintenance of Records and Trust Accounts/Wisconsin Laws
- Course C Federal Laws Relating to Auctioneering and Wisconsin Laws (other than those in course A and B)

Everyone must take one of the following 5 electives:

- Course D1 Real Estate Auctions/Practice and Legal Requirements
- Course D2 Commercial Auctions/Practice and Legal Requirements
- Course D3 Agricultural Auctions/Practice and Legal Requirements
- Course D4 Antiques, Collectibles, or Household Auctions/Practice and Legal Requirements
- Course D5 Other Related Types of Specialty Auctions/Practice and Legal Requirements

Exceptions to CE

Initial Licensees: Licensees do not have to complete CE if initially registered less than 6 months before the first renewal (July - December, 2004). Verify grant date under License Lookup at www.drl.state.wi.us.

Test-out Option: Licensees may take a 60 question test-out examination by contacting the department. Test-out for the 2003-2004 biennium is expected to be available in January, 2004. The test-out examination may be retaken one time. Licensees unsuccessful after 2 tries must take the approved courses.

Verification of CE Completion

Credential holders must maintain proof of completion of CE. The Department will conduct a random audit of CE completion after every renewal cycle. (Schools maintain CE completion records for 5 years.)

Persons who cannot complete CE requirements by December 31 of the biennium should not renew, and should cease practice of any of the activities covered by the license until CE is completed and the license is renewed.

Renewing late upon completion of CE is better than falsifying the renewal. Those who have falsified the renewal and are found to be noncompliant will face suspension of their credential and other discipline.

Extensions of time may be granted to licensees on active duty in the military service outside Wisconsin, or for verified health or other compelling reasons beyond the control of the licensee.

Renewal of License

Licenses must be renewed by December 31 of each even numbered year. To receive a notice when renewal is due, be sure to keep the Department informed of your current address.

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

APPLICATION FOR AUCTIONEER CONTINUING EDUCATION TEST-OUT EXAMINATION

Under Wisconsin law, the Department must deny your application if you are liable for delinquent state taxes or child support (sec. 440.12, Stats.).

☐ Your name and address are available to the public.

PLEASE TYPE OR PRINT IN INK

☐ Check box if you wish your name & address withheld from lists of 10 or more credential holders (sec. 440.14, Stats.).

Last Name	First Name	MI	Former / Maiden Name(s)
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Your Street Address (number, street, city, state, zip)

Mail To Address (if different)

Date of Birth	Daytime Telephone Number
____ month ____ day ____ year	(____) ____ - ____

Ethnic/gender status information is optional. Sex: ☐ M ☐ F Ethnic: ☐ White, not of Hispanic origin ☐ Black, not of Hispanic origin ☐ Hispanic ☐ American Indian or Alaskan ☐ Asian or Pacific Islander ☐ Other

Have you ever held a license/credential in the state of Wisconsin? ____ Yes ____ No (please indicate)

If yes, provide your Wisconsin license/credential number. _____

Auctioneer Registration Number

DEADLINE FOR EXAM DATE IS 30 DAYS BEFORE THE DATE YOU SELECT.

SELECT EXAM DATE	
<input type="checkbox"/> January 8, 2004	<input type="checkbox"/> July 8, 2004
<input type="checkbox"/> February 12, 2004	<input type="checkbox"/> August 12, 2004
<input type="checkbox"/> March 11, 2004	<input type="checkbox"/> September 9, 2004
<input type="checkbox"/> April 8, 2004	<input type="checkbox"/> October 14. 2—4
<input type="checkbox"/> May 13, 2004	<input type="checkbox"/> November 11, 2004
<input type="checkbox"/> June 10, 2004	<input type="checkbox"/> December 9, 2004

APPLICATION FEE: Make check or money order payable to Department of Regulation and Licensing and attach to this application.

- ☐ \$ 57.00 Exam fee
☐ \$ 57.00 Re-exam fee

For Receipting Use Only

Wisconsin Department of Regulation & Licensing

MARK AN X IN THE APPROPRIATE BOX. If you answer Yes to any question, give all details on a separate sheet.

YES

NO

- a. Have you ever been convicted of a misdemeanor or a felony, or driving while intoxicated (DWI), in this or any other state, OR are criminal charges or DWI charges currently pending against you? If YES, complete and attach Form #2252. ☐ ☐
- b. Have you ever surrendered, resigned, canceled or been denied a professional license or other credential in Wisconsin or any other jurisdiction? If YES, give details on an attached sheet, including the name of the profession and the agency. ☐ ☐
- c. Has any licensing or other credentialing agency ever taken any disciplinary action against you, including but not limited to, any warning, reprimand, suspension, probation, limitation or revocation? If YES, attach a sheet providing details about the action, including the name of the credentialing agency and date of action. ☐ ☐
- d. Is disciplinary action pending against you in any jurisdiction? If YES, attach a sheet providing details about pending action, including the name of the agency and status of action. ☐ ☐
- e. Have any suits or claims ever been filed against you as a result of professional services? If YES, submit a copy of the claim or suit and a copy of the final settlement or disposition. ☐ ☐
- f. Do you currently hold, or have you in the past held, any credential (license) issued by the Department of Regulation and Licensing or any of the Boards? If YES, what type of credential? ☐ ☐

And if in another name, what name? _____

APPLICANT MUST SIGN

I state that I am the person referred to in this application and that all the answers set forth are each and all strictly true in every respect. I understand that false or forged statements made in connection with this application may be grounds for conviction of a crime and revocation of my credential. I also understand that if I am issued a credential, failure to comply with the laws and rules of the Department of Regulation and Licensing will be cause for disciplinary action.

Signature of Applicant

Date

Type or Print Name of Person Signing Above

Wisconsin Department of Regulation & Licensing

SOCIAL SECURITY NUMBER. Your social security number (or employer identification number if you are applying as a business entity) must be submitted with your application on this form. If you do not have a social security number you must submit a statement under oath or affirmation. If your social security number or a statement is not provided, your application will be denied.¹ A form for submitting a statement that you do not have a social security number is available from the department.

(Please Print)

First Name	Middle Initial	Last Name
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Profession

Date of Birth
 month day year

- -

Social Security Number or FEIN

The Department may not disclose the social security number collected above except to the Department of Workforce Development for purposes of administering the child and spousal support program,² to the Department of Revenue for the purpose of determining whether you are liable for delinquent taxes,³ and to the federal Healthcare Integrity and Protection Data Bank for the purpose of reporting adverse actions against health care practitioners.⁴

¹ Section 440.03 (11m), Wis. Stats.

² Sections 49.22, and 440.13, Wis. Stats.

³ Section 440.12, Wis. Stats.

⁴ Health Insurance Portability and Accountability Act (HIPAA) of 1996

This form is authorized by secs. 440.12 and 440.14, Wis. Stats. Making a false statement in connection with this application may result in revocation or denial.

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Website: <http://www.drl.state.wi.us>

CONVICTIONS AND PENDING CHARGES

If you have been convicted of a crime or have criminal charges pending against you, complete this form and return it with your application. Include a \$6.00 Crime Information Bureau report fee in addition to your original application fees.

The Fair Employment Act (sections 111.31-111.395, Wis. Stats.) prohibits employment discrimination on the basis of conviction record or arrest record unless the circumstances of the conviction or arrest substantially relate to the circumstances of the particular job or licensed activity. The information requested on this form will be used to determine whether your application should be granted, approved with limitations, or denied. The information you provide on this form may be verified against criminal information records. Omission of information on this form will be considered a false statement on an application.

Profession you are applying for: _____

Last Name	First Name	MI	Former / Maiden Name(s)
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Your Street Address (number, street, city, state, zip)

Mail To Address (if different)

Date of Birth	Social Security Number
____ month ____ day ____ year	_____

Information helps us identify your record, but is voluntary. It is not available to the public.

Ethnic/gender information is required to check criminal information records.

Sex: ☐ M
☐ F

Ethnic: ☐ White, not of Hispanic origin
☐ Black, not of Hispanic origin
☐ Hispanic

☐ American Indian or Alaskan
☐ Asian or Pacific Islander
☐ Other

1. List all other names used: _____
2. List all felonies, misdemeanors, and other violations of state or federal law of which you have ever been convicted, in this state or any other, whether the conviction resulted from a plea of no contest or a guilty plea or verdict. For each, list the date and location of the conviction. Please include all convictions that involved alcohol or other drug use, including convictions for operating while intoxicated. Do not include municipal ordinance violations or other traffic offenses.

It is your responsibility to submit certified copies of the police report or criminal complaint, judgment of conviction and sentencing, and verification of your compliance with all terms of each sentence, including chemical dependency assessments if ordered by the court. If the conviction is old and records have been destroyed, you must submit a written description of each offense, along with an explanation of the penalties imposed and verification that you completed all requirements.

OFFENSE

DATE

CITY/STATE

Attach additional sheet(s) if necessary.

Wisconsin Department of Regulation & Licensing

3. Have you ever been sentenced by a court to participate in an alcohol or other drug assessment, treatment or counseling program? YES NO MO/YR COMPLETED
☐ ☐ _____
Did you successfully complete the program? ☐ ☐ _____
Please attach the certificate of completion/discharge summary.

- (Check all that apply)
4. Have you ever been sentenced to: YES NO MO/YR COMPLETED
☐ Probation ☐ ☐ _____
☐ Parole ☐ ☐ _____
☐ Ordered to pay restitution ☐ ☐ _____
Did you successfully complete one of the above as ordered by the court? ☐ ☐ _____

If you are currently on probation or parole, you must request your probation/parole officer to send a letter describing your current probation/parole requirements and your compliance with supervision.

5. List all felonies, misdemeanors, or other violations of state or federal law for which you have been arrested and which are **pending**. Submit a copy of the police report/criminal complaint for each of the following pending charges.

<u>PENDING CHARGE</u>	<u>DATE OF ARREST</u>	<u>LOCATION OF ARREST (city/state)</u>
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Comments you wish to make regarding your convictions or pending charges. Attach another sheet if necessary.

AFFIDAVIT OF APPLICANT

I state that I am the person referred to in this document and that all the information which I provided above is true in every respect. I understand that false or forged statements made in this document in connection with my application for a credential, or failing to provide relevant information, may be grounds for denial of the application, revocation of the credential granted to me, or criminal prosecution. This document must be signed before a notary public.

Signature

State of _____ County of _____

Signed and sworn before me this _____ day of _____, 20____ by _____
(applicant's name)

Signature of Notary Public

My commission (is permanent) _____ expires _____.

SEAL

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

WISCONSIN STATUTES AND ADMINISTRATIVE CODE ORDER FORM

For assistance with the open book exam (if required) or for your information, you may access the Wisconsin Statutes and Administrative Code on the department's web site at www.drl.state.wi.us. If you do not have internet access, you may obtain this information through the public library.

If you would prefer to have a printed copy of any code book, you may purchase one directly from the department. Please submit this form along with a check in the amount of \$5.28 per book made payable to the Department of Regulation and Licensing (DRL) to the address listed above.

Mark which profession(s) you are requesting below:

<input type="checkbox"/> Accounting	<input type="checkbox"/> Funeral Directors
<input type="checkbox"/> Architects, Landscape Architects, Engineers, Designers & Land Surveyors	<input type="checkbox"/> Geology, Hydrology and Soil Science
<input type="checkbox"/> Auctioneer & Auction Company	<input type="checkbox"/> Home Inspectors
<input type="checkbox"/> Barbering and Cosmetology	<input type="checkbox"/> Interior Designers
<input type="checkbox"/> Cemetery Authorities, Cemetery	<input type="checkbox"/> Nursing Home Administrators
<input type="checkbox"/> Salespersons & Preneed Sellers	<input type="checkbox"/> Private Detectives & Private Security Persons
<input type="checkbox"/> Charitable Organizations, Professional Fund-Raisers & Professional Fund-Raising Counsel	<input type="checkbox"/> Real Estate Agents
	<input type="checkbox"/> Real Estate Appraisers
<input type="checkbox"/> # OF BOOKS REQUESTED x \$5.28 each =	<input type="checkbox"/> TOTAL AMOUNT ENCLOSED

Make your check payable to the Department of Regulation & Licensing (DRL) and return with this form to the address shown above.

NAME

COMPANY/ORGANIZATION

STREET ADDRESS/PO BOX

CITY/COUNTY

STATE

ZIP

For Receipting Use Only

#953 (9/03)

Ch. 440, Stats.

Wisconsin Department of Regulation & Licensing

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NOTICES

TIME FOR REVIEW AND DETERMINATION OF CREDENTIAL APPLICATIONS

Generally, a credentialing authority is required to make a determination on an original application for a credential within 60 business days after a completed application is received.^a An application is completed when all materials necessary to make a determination on the application and all materials requested by the licensing authority have been received.

PROCEDURES ON APPLICATION DENIAL

An applicant who receives a notice of denial may request a hearing to challenge the denial by filing a request with the appropriate board or the department within 45 days after the mailing of the notice of denial. The request must contain the applicant's name and address, the type of license sought, the reasons why a hearing is requested and a description of the mistake the applicant believes was made, if the applicant claims that the denial was based on a mistake of fact or law. Hearing procedures are specified in ch. RL 1 of the Wisconsin Administrative Code. A copy of ch. RL 1 is available at most public libraries, on the Internet through the index at <http://www.legis.state.wi.us/rsb/code/rl/rl.html> and may also be obtained from the department.

MAILING ADDRESS AND CHANGE OF ADDRESS

Credential holders may use a business address as a mailing address for department mail. A change of address must be reported to the department within 30 days.

PERSONALLY IDENTIFIABLE INFORMATION: USE AND AVAILABILITY

Information collected on an application form is required and will be used to determine eligibility for a credential or examination. It is not likely that the department will use information collected by these forms for other purposes.

Credentialing is a public process with a goal of identifying those competent to protect the public. The name, city, and status of credential holders are accessible at the Department's website at <http://www.drl.state.wi.us/> under "Credential Holder Query." Information collected on application and examination forms is available for inspection to the public under Wisconsin laws governing public records.

AMERICANS WITH DISABILITIES ACT

The Department complies with the Americans With Disabilities Act of 1990. The Department will make reasonable modifications to policies, practices and procedures when modifications are necessary to avoid discrimination on the basis of disability and will make reasonable accommodations necessary to provide a qualified individual with a disability with equal access to department programs.

Communications and examinations: Individuals who need auxiliary aids for effective communication in programs and services or who wish to request special accommodations for examinations, please call (608) 266-2852 or TTY at (608) 267-2416.

Complaints: Procedures for alleging violations of the Americans with Disabilities Act of 1990 may be obtained by calling the Department's ADA Coordinator at (608) 266-8608 or TTY at (608) 267-2416.